PATENT APPLICATION EE DETERMINATION RECORD

Effective ecember 8, 2004

Application or Docket Number 10/539886

CLAIMS AS FILED - PART I									ــــــــــــــــــــــــــــــــــــــ			
			(Column 1)			(Column 2)	SMALL ENTI TYPE		TITY	OR	OTHER THAN OR SMALL ENTITY	
U.S. NATIONAL STAGE FEES			i					RATE	FEE	7	RATE	FEE
BAS	SIC FEE		SMALL ENT. = \$ 150		LARGE ENT. = \$ 300		BAS	IC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			All other situations = . \$ 100 / \$ 200		M. FEE	1/00	1	EXAM. FEE	
SEARCH FEE			All other situations (ie. No U.S Search Rpt.) = \$ 250 / \$ 500			S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		RCH FEE	 		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =		X	\$ 125 =		1	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			3 mir	nus 20 =	*			\$ 25 =	 	OR	X \$ 50 =	
IND	EPENDENT CL	AIMS .	minus 3 = *					\$ 100 =		OR	X \$ 200 =	
		DENT CLAIM PRE						180 =	 	OR	+ \$ 360 =	
* If	the difference	in column 1 is I	ess than zero	ss than zero, enter "0" in co			mn 2 TOTAL			OR	TOTAL	
CLAIMS AS AMENDED - PART II											L	
	I	(Column 1)	- THE NOLD	(Column 2) (Column 3)			SMALL ENTITY		OR	OTHER SMALL E		
AMENDMENT A		REMAINING AFTER AMENDMENT	·	NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA	F	RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	X \$	100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							180 =		OR	+ \$ 360 =	
								L ADDIT. FFF		OR	TOTAL ADDIT. FFF	
		(Column 1)		(Colum	າກ 2)	(Column 3)					_	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X \$	5 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		= .	X \$	100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$	180 =		OR	+ \$ 360 =	
TOTAL AI										OR	TOTAL ADDIT.	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875 (Rev. 02/2005)												